2017 ADULT SOFTBALL

Summer/Fall Season

Team

Registration: Tuesday, June 13 at the CRC

From 8am-4:45pm

Season Begins: July 24, 2017

Game Times: 6:00/7:15/8:30 Mon. thru Fri. at

Patricia H. Birdsall Sports Park

EVENING PLAYED	DIVISION	TEAM FEE
Monday	Men's II	\$500.00*
Tuesday	Men's I/ Women's	\$500.00*
Wednesday	Corporate Softball	\$500.00*
Thursday	Men's II	\$500.00*
Friday	COED	\$500.00*

*Team fee is \$500 + \$10 for any non-Temecula residents
Division I is the most competitive division

League Director reserves the right to place teams in division he deems appropriate.

REGISTRATION INFORMATION

The following **MUST** be submitted to CRC office at registration:

- 1. Team fee of \$500.00 plus a non-resident fee of \$10.00 for each non-resident on the team roster. Players living in unincorporated areas (Morgan Hill, Wine Country, etc.) are also required to pay the additional \$10.00 non-resident fee. Non- resident fees are non-refundable and non-transferable.
 - Make checks payable to City of Temecula.
- 2. Completed W/S 2017 Softball Roster Form.
- 3. A copy of each player's driver's license/photo ID.
- 4. For **Temecula Residence** verification/points A copy of current utility bill required.
- For Temecula Employment verification/points

 A Business Card or letter from company.

 For Corporate Division a paystub, ID

 badge or business card will be required to
 prove employment no letter from employer.

If any of the above is not submitted at registration, you will be placed on a waiting list and your packet will be returned to you for completion.

QUALIFICATIONS

Men and women eighteen (18) years of age and older are eligible to participate. All participants must submit a photocopy of their valid Driver's License/I.D.

Corporate Softball teams may ONLY have that company's employees on roster. Proof of employment, such as pay stub or business card, will be required for all players before they are allowed to play. A letter from employer will not be accepted.

LEAGUE FEES

The softball program is a self-supporting program. League fees are subject to change from season to season. The fees cover the cost of awards, S.C.M.A.F. registration, lights, equipment (bats & balls), field preparations, and umpires.

ROSTER AND PLAYER ELIGIBILITY

- 1) Each team shall be allowed a maximum of sixteen (16) players which includes a playing manager. Only players listed on the roster may play in league games. In Men's leagues only men on roster, in Women's leagues only women on roster.
- 2) **ADD/DROP POLICY** The add/drops may be used, as needed, during the first half of the season. Once a team officially drops a player, he/she cannot play for any other team that night for the remainder of the season. Players may play for only one team each night. No roster changes may be made during the second half of the season. To make a roster change, the manager shall submit, in person or by email to the Birdsall Sports office, an add/drop form identifying the person(s) to be added and the person(s) to be dropped. A copy of their Driver's License and a utility bill (for residence verification) shall also be submitted with the add/drop form. A non-resident fee will be charged for any non-resident being added. The CSD shall approve all roster changes and determine the effective date of league eligibility for each new player. Add/Drop forms should be submitted three (3) working days before the next scheduled game. Use of the new player without specific approval or prior to the effective date of eligibility shall result in a forfeit due to an ineligible player.

LEAGUE RULES, REGULATIONS AND PROCEDURES

The Southern California Municipal Athletic Federation (SCMAF) Softball Rules will govern play unless otherwise stated in the CSD general rules.

- 1) ONLY CITY ISSUED BATS WILL BE ALLOWED FOR ALL GAMES. PLAYERS MAY NOT USE THEIR OWN BATS.
- 2) Rain-Outs Wet fields and/or other conditions, information will be available on the day of the scheduled game by calling the City's Field Condition Hotline at (951) 694-6447, after 3:00 p.m. It is the responsibility of each manager/coach to check field conditions in the event of possible rainouts. Umpires will make decision to continue or postpone games in progress once rain starts.
- 3) **No umpire:** If an umpire does not show up, games may be played with volunteer umpire if both coaches agree to it. Games will be official.
- 4) **Forfeit Time:** Five (5) minute grace period. The umpire's watch is the official time.
- 5) **Scorekeeper:** The home team shall provide a volunteer scorekeeper for the game. Extra score sheets will be provided for each game by the umpire, if needed.
- 6) **Time Limit:** A new inning shall not begin after one hour and five minutes from game time. Games are seven innings or one hour and five minutes.
- 7) **Mercy Rule:** A game shall be called due to run rule when all of the following apply:
 - 1) A team is losing by fifteen (15) or more runs.
 2) The losing team has betted at least four times.
 - 2) The losing team has batted at least four times.3) The number of at-bats by the losing team is
 - equal to or exceeds the number of at bats by the winning team. NOTE: Any team starting a game with less than ten players shall have a twelve (12) run mercy rule.
- 8) **Infield Practice:** Allowed while the pitcher is taking warm-up pitches in the first inning **only.** Infield practice is not allowed before a game or between innings of a game.
- 9) Four Strike Rule
- 10) Slide or avoid at any base
- 11) **Lead off:** After the ball leaves the pitchers hand.

12) **Tie Game:** An additional inning will be played, if time available. Last out of previous inning takes second base with following batters until three outs are made. Home team does the same. If after that inning, the game is still a tie, it will be recorded as such and will not be replayed.

Minimum Players: A team shall not start nor

13)

- continue a game with only seven players. A team must play with eight or more players.

 A Co-Ed game may be played with nine (9) roster players, with no more than five (5) of either sex. (Example: 4 women / 5 men; or 5 women / 4 men.) For corporate softball, a max of 7 male players may be on the field at one time.
- 14) **Batting Order:** Co-Ed teams must alternate sex of batting order. **For corporate softball, no more than 3 males may bat in a row before a female must bat.**
- 15) Absolutely No Alcoholic Beverages or Smoking: Alcoholic beverages and smoking are not permitted in any city park before, during, and after games. Forfeiture of game may result if this occurs, along with expulsion from the league. Players violating this rule will be suspended immediately.
- 16) **Courtesy Runner:** One courtesy runner per inning, courtesy runner being the last out. In Co-Ed runner must be of same sex.
- 17) **Non-Sportsmanlike Conduct:** Will not be tolerated.
- 18) **Completed Game** 3 ½ or 4 innings will be a completed game.
- 19) **Game Protests:** (Protest rules & form can be downloaded from city's sports website) Have 24hrs to turn in or by the next working day. \$30.00 protest cost. If challenge is won, \$30 is refunded

LEAGUE STANDINGS

- 1) Playoff seeding will be determined by the overall standings at the end of the regular season.
- Playoff games will be scheduled by the CSD office.
- Awards 1st and 2nd place teams will receive individual awards.

INSURANCE

The CSD does not have medical insurance to cover players injured during a game. This means you are participating at your own risk. Teams who wish to participate in the Southern California Municipal Athletic Federation, Player's Medical Benefit Fund, may do so for a fee \$42.00. A full explanation of the P.M.B.F. coverage is as follows:

PLAYER'S MEDICAL BENEFIT FUND -OPTIONAL

- 1. This is not an insurance policy or guarantee.
- 2. The purpose of the Fund is to render financial assistance to the injured player (Not to the doctor or hospital) in such amounts as the committee may deem proper, and such decision shall be final. Payment of dues or assessments, the filing or claims of submission of doctor or medical bills does not constitute a binding claim upon the Fund.
- 3. The maximum reimbursement which any one participant can possibly receive in any one period of twelve (12) consecutive months or as a result of any injury is \$500.00
- 4. The Player's Medical Benefit Fund Committee will refuse to consider any claim unless **itemized**, paid, receipt or medical bills are presented.
- 5. When the injured participant is entitled to payment reimbursement or indemnity from any source, or under any insurance coverage, private or group medical plan or system, either individually or as a dependent, such participant must exhaust all relief from such sources before his claim may be considered by the Fund.
- 6. The Fund shall not be liable for more than dental injuries involving \$200.00 in connection with the replacement of natural teeth.

City of Temecula

Community Services Department

ADULT SOFTBALL LEAGUE



SUMMER / FALL 2017

REGISTRATION PACKET

Patricia H. Birdsall Sports Park
Sports Office
(951) 302-4136
32380 Deer Hollow Way
Temecula, CA 92592
Field Conditions - (951) 694-6447
www.temeculaCA.gov/sports

City of Temecula – Community Services Department (CSD) 2017 SUMMER / FALL SOFTBALL TEAM INFORMATION

Current Season			Last Season Participated			
Team Name:			Team Name:			
Sponsor:			Sponsor:			
League:(circle one) Men's	s / Women / CO	DED / Corporate	League:(circle one) Men's / Women / COED / Corporate			Corporate
Requested Division:(circle o		III (COED Only) RANTEED*	Division:(circle one) I II III-COED			
Te	am Manager		Assistant Team Manager			
Name:			Name:			
Address:			Address:			
City, State, Zip:			City, State, Zip:			
Home Phone: ()			Home Phone: ()			
Cell Phone: ()			Cell Phone: ()			
E-mail Address: E-mail Address:						
Point System (Points will <u>not</u> be awarded if photo ID <u>not</u> included, in addition to documentation below.						
In the event there are more teams than available openings, the following point system will be used:			For CSD Use Only			
Temecula Resident (Proof of Temecula Residency required for pts.) 2 pts each			2 pts each			
Temecula Employment (Proof of Temecula Employment required for pts.)			for pts.)	1 pt each		
Temecula Business Sponsor Full Sp (Proof of Sponsorship required for pts.) ½ Spo		ponsor: onsor:	3 pts 1.5 pts			
Temecula Resident Team (Team with 8 or more Temecula residents			ts)	5 pts		
Returning Team (Team participated in previous season and must ha 65% roster members returning.)			ave	5 pts		
For CSD Use Only	Date:	Received by:	Cash:	Check:	Total:	Total:

SUSPENDED PLAYER

- 1) The umpire is in complete control of the game. Unsportsmanlike conduct by a player, manager, coach, teams sponsor, attendant, or follower necessitates ejection from the game.
- 2) An individual ejected from the game must leave the park. The umpire may forfeit the game if an individual fails to comply with league rules.
- 3) A team member ejected from a game for any reason is automatically suspended from participating in his/her team's next scheduled game. This includes coaching, sitting in dugout, etc. The league director may also rule on additional penalties if deemed appropriate. Team manager or acting manager is responsible for giving umpire the name of an ejected player. Any manager or acting manager giving a false name will be penalized by his or her team receiving an additional full game loss in the standings.
- 4) Any player or coach ejected for inflicting or attempting unnecessary bodily harm to any player, umpire, employee, or spectator, shall be suspended for not less than four (4) games and cannot play until the CSD makes a final decision. The presiding umpire shall provide a written report to the CSD, stating the cause of ejection.
- 5) Said player will be out the first time his/her name comes up in the batting order, then said player will be scratched from line-up without further penalty. In Co-ed the same applies with the following batter being scratched first time with out any penalty.

PROTEST RULES AND PROCEDURES

I have read and understand the protest rules and procedures on the Softball Protest Form.

Manager Signature:	Date:
--------------------	-------

CITY OF TEMECULA - COMMUNITY SERVICES DEPARTMENT 2017 SUMMER / FALL SOFTBALL ROSTER FORM

I, the undersigned, understand the TCSD carries no medical insurance for Adult Softball Leagues and Programs, and assume risk of accident of injuries from whatever cause in connection therewith, and release the TCSD and their officers, agents, officials and employees from any and all liability for any such accident or injury. I hereby grant permission to the TCSD to use my likeness in photograph(s) / video in any and all of its publications and in any and all other media, without further consideration, and I acknowledge the TCSD's right to crop or treat the photograph at its discretion. I hereby waive any right to inspect or approve the photographs or electronic media, and I waive any right to royalties or other compensation arising from or related to the use of the photograph(s) / video. I also understand that if my likeness is used in marketing or a public relations nature, posted on a City of Temecula website, my likeness may be downloaded by any computer user or photocopied. Therefore, I agree to indemnify and hold harmless from any claims the following: The City of Temecula Community Services District; their officers, agents, officials and employees.

Name	Signature	Street Address	City	Zip Code	Phone #
1.					
1. 2. 3.					
3.					
4. 5. 6. 7. 8. 9.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					

CITY OF TEMECULA - COMMUNITY SERVICES DEPARTMENT

SOFTBALL ADD/DROP FORM

(For use only when making changes to existing roster)

connection therewith, and release to the TCSD to use my likeness in phoreight to crop or treat the photograp compensation arising from or relate of Temecula website, my likeness m City of Temecula Community Serve 1) A \$10.00 non-resident fee must in full. All Add/Drops are non-refi	the TCSD and their officers, agents, official tograph(s) / video in any and all of its publish at its discretion. I hereby waive any rigled to the use of the photograph(s) / video. Th	Manager's Name:	any such accident of out further considera ectronic media, and a marketing or a pub fy and hold harmles orms will not be accident fee.	rinjury. I hereby gration, and I acknow I waive any right to lic relations nature s from any claims the	ant permission to ledge the TCSD's royalties or other , posted on a City ne following: The
Name	Signature	Street Address	City	Zip Code	Phone #
1.					
2.					
3.					
4.					
5.					
	~PLA`	YERS TO BE DROPPED~	-		
Name					
1.					
2.					
3.					
4.					
5.					
		For CSD Use Only:			
Date Received:	Received by:	Effective Date:	Non-	Resident:	



ADULT SOFTBALL SPONORSHIP/BANNER PLACEMENT AGREEMENT

Companies that pay full sponsorship (must pay entire \$500 team registration fee) may hang one (1) banner on the Birdsall Sports Park softball fields for the upcoming **SUMMER/FALL 2017** adult softball season. Sponsoring companies are required to provide the banner, and will receive it back at the conclusion of the specified season.

Banners must meet the following criteria to be considered for placement:

- Max size: 3ft height X 5ft wide.
- Banner owner releases the City of Temecula from any liability that may occur from theft, damage or vandalism. (Sponsor may provide new banner, if necessary, for remainder of specified softball season)
- Banner will be removed at conclusion of specified season, unless company pays normal advertising price to extend.
- Banner must be approved by the City of Temecula's Community Services Department prior to placement.

Restrictions:

Team Information

Advertising of alcohol or tobacco products, or any product deemed inappropriate by the City of Temecula will not be allowed. Additionally, religious and political organizations, parties currently involved in a lawsuit adverse to the City, and businesses that create a conflict of interest for the City will not be eligible to advertise on city property. The City of Temecula reserves the right to deny or remove any banner at any time.

Team Name: _____ Season: League/Division: _____ Team Manager: _____ Phone Number: _____ Address: _____ **Sponsor Information** Sponsor Name: Sponsor's Email: Sponsor's Contact Name and Position: Sponsor's Address: Sponsor Phone Number: _____ Sponsor's Signature: _____ Signature confirms understanding of stated requirements. For Official Use Only Date Banner Received: _____ Date Banner will be removed: _____ Full team fee paid?